

OFFICIAL ENTRY FORM

German Shorthaired Pointer Club of Canada

FEE _____

LISTING FEE _____

Field Dog Test for Pointing Breeds

TOTAL _____

Date September 17, 2017

TEST ENTERED

Test 1 _____

Test 2 _____

_FDJ _FD _FDA _FDX

_FDJ _FD _FDA _FDX

DOG INFORMATION

Registered Name of Dog _____

Call Name _____

Breed _____ __Male __Female

_CKC registration # _____ _CKC miscellaneous # _____ Listed _____

_ ERN # _____ PRN # _____

DD MM YY

Date of Birth _____ Place of birth _Canada _other

Breeder _____

Sire _____ Dame _____

OWNER(S) AGENT INFORMATION

Registered Owner(s) _____

Owner's address _____

Handler's address _____

I CERTIFY that I am the registered owner(s) of the dog or that I am the authorized agent of the actual owner(s) whose name(s) I have entered above and accept to be bound by the rules and regulations of The Canadian Kennel Club and by any additional rules and regulations appearing in the premium list.

Signature of Owner/Handler

Telephone #

Email

